	21401-2535 <u>nnapolis.gov</u> • 410-263-7929 • Fa eaf, hard of hearing or speech disal	x 410-280-1853 • <u>w</u> w oility - use MD Relay o	or 711	
NON 15, 30130 0	Campaign Fund	d Report	Find	Report /
0 12:57 PM	Summary of Receipts and	d Disbursements	/ [Van	The state of the s
Frieds & Name of candidate or commi	Stem Cann Itee as filed with the election office	Alderna	Cadidah Office	Ward
Bank information	Bank name	1	Account number	
1. Checking	PNC, Bank	<u> </u>	247799	
2. Other				
Transaction period from: Due no later than 4:30PM (S	10/28/13 ee Candidate Packet Memo for dates)	to 11/8	113,	
Final Surplus funds distributed Summary of Receipts and Di 1. Cash balance - beginning 2. Receipts from Schedule 1 3. Proceeds from Schedule 2 4. Total cash available (Add 5. Disbursements from Schedule 2 Column 3 \$ 2	sbursements of transaction period , column 4 2, column 4 lines 1, 2 and 3)		\$ \$22 \$540 \$ \$ \$282	75.43 7.00 0.43
Column 4 852	<u>, 0. 12.</u>			
6. Total disbursements	<u>, </u>		\$ \$12x	20.43
	nsaction period (Subtract line 6 fron	n line 4)	0	/
8. Total outstanding obligation		·	\$ \$ 709	554
In-kind contributions from			\$ 0	
Under penalty of perjury, I deck the best of my knowledge and k	are that I have examined this report, belief it is true, correct and complete and chairman must sign report.)	. (If report of candidat	e, candidate and t	1//3
Treasurer	Keip 1	D	Date	2013
Chairman of Committee or Sla	· / By W/m	/l- D	Date	11, 2013_



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Name of candidate or committee	Friends of	Steven Cour.	
Report period - transactions from	10/28/2013	to 11/8/13	

Schedule 1 - Contributions and Receipts

(Excluding Transfers, Loans and In-kind Contributions)

Complete name and residence address of Payer	Descript	ion of receipt. S	ee instru	ctions for code.	Amount
Down Hyeriok	Code *	Ticket price	Cash	\$25.W	\$25.00
1223 McKinky St.	C		Check#		
1.000 WMD 31403	* T, enter	price per ticket	Rcpt#	CEK714368D182	1989 ·
130 y = 11 0 21100	Aggregate	e amount receive	ed from P	ayer to date	\$50W
Robyn Palmer (Scoff)	Code *	Ticket price	Cash	\$600.00	\$ 100.00
1231 Vandura DO	C		Check#		
Amapolis MD 21403	* T, enter	price per ticket	Rcpt#	9170695188 34	7844
	Aggregate	e amount receive	ed from P	ayer to date	1512500
Warne Adamson	Code *	Ticket price	Cash	\$20.00	\$20.00
	4		Check#		V .
				78745508G19	749720
piracipolis, ity 2009	Aggregate	e amount receive	ed from P	ayer to date	\$45.00
Encode of Hotol Million	Code *	Ticket price	Cash		
141 Dever Drive	C		Check#	15-3/540	\$25000
Annalis MD 21401		• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , ,		
,		e amount receive	ed from P	ayer to date	\$250.00
Dovd M. Proston	Code *	Ticket price	Cash		
3120 Mun 7 D	C		Check #	7005	\$100,00
Annapolis, MD 21403-1624	* T, enter				
•	Aggregate	e amount receive	ayer to date	\$100.00	
Risell Jugraham	Code *	Ticket price	Cash	\$50.00 ·	\$50,00
1127 August Dr.	C		Check#		B
L. 011CMD 214173	1	<u> </u>			360038
magaist b cites	Aggregate	\$ 100.0D			
	. Code *	Ticket price	Cash		-
			Check#	·	
		<u> </u>	'		
	Aggregate	e amount receive	ed from P	ayer to date	\$ 545a)
	address of Payer Daun Hunink 1228 McKinley St. Annewly, MD 21403 Robyn Palmer (Scott) 1231 Vanswan Dn Annapolis, MD 21403. Wagne Adamson 1225 Van Burn Dr. Annapolis, MD 21403 Frieds of Hebit Millan. 141 Dewy Drive Annapolis, MD 21401	address of Payer Dawn Hvaink Code* 1223 McKinley St. Arrapolis, MD 21403 Freds of Habit Millan. 141 Deves Price Aggregate Dovul M. Proston Dovul M. Proston Arrapolis, MD 21403 Powell Francham Pusell Francham Code* Code* Code* T, enter Aggregate Aggregate Code* T, enter Threpolis, MD 21403	address of Payer Dawn If variable 1972 Arraphy, MD 21403 Robyn Palma (Scott) 21403 Arraphis, MD 21403 Arraphis, MD 21403 T, enter price per ticket Aggregate amount receive Aggregate Aggregat	address of Payer Day Hunk 128 Minky St. Arraphy M 21403 Robyn Palmor (Scott) 1231 Van Man Dr Amapolis MD 21403 Wagne Adamson 128 Man Burn Dr. Amapolis MD 21403 Friedra of Habit Millan. 141 Deny princ Amapolis, MD 21403 Dovul M. Proston 3120 Man 2 Dr Amapolis MD 21403 Post of Habit Millan. 128 Man Burn Dr. Amapolis, MD 21403 Dovul M. Proston 3120 Man 2 Dr Amapolis, MD 21403-1624 Regregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P Code * Ticket price Cash Check # *T, enter price per ticket Rept # Aggregate amount received from P	Day Huniph 123 Miking St. Arraphy MD 21403 Robyn Palmo (Scott) 1231 Vandwa Dr Amapolis MD 21403 Aggregate amount received from Payer to date Code* Ticket price Cash MOD 00 Check# *T, enter price per ticket Ropt # (DRANGOW) Aggregate amount received from Payer to date Code* Ticket price Cash MOD 00 Check# *T, enter price per ticket Ropt # THOUSHING 30 Aggregate amount received from Payer to date Code* Ticket price Cash Sou 00 Check# *T, enter price per ticket Ropt # THOUSHING 30 Aggregate amount received from Payer to date Code* Ticket price Cash Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# *T, enter price per ticket Ropt # Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Coheck# Aggregate amount received from Payer to date Code* Ticket price Cash Check#

Total this page \$

\$ 545.00



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	date or committee Fred transactions from 10/23	s of Steven Comm 1/20/3 to 1/18/19								
Schedule 2 - Loans and Transfers										
Date received	Complete name and residence address of Payer	Description of loan or transfer	Amount							
		Aggregate amount of loan or transfer \$								
		Aggregate amount of loan or transfer \$								
		Aggregate amount of loan or transfer \$								
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loan or transfer \$

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Name of candidate or committee Fracd & Stand Connections from 10/28/26/3 to 11/2 Schedule 3 - Dish

Schedule 3 - Disbursements

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																committee name required)	Transfers to other funds (candidate or	۲5 ا
	-															Amount		



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Report period - transactions from Name of candidate or committee てくなのし 12812013 する ر کو گ ਰ

Schedule 3 - Disbursements

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Report period - transactions from Name of candidate or committee 3 ರ

Schedule 3 - Disbursements

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Schedule 3 - Disbursements

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* passal represent of \$ 1255.66 of personal Ends



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Name of fund or committee Fig. 3	of Storn Gun									
Schedule 4 - Outstanding Obligations as of End of Report Period										
1	2	3	. 4							
Name and address	Description of debt (Loans, unpaid bills, etc.)	Date debt incurred	Amount							
Stern Conn IIII Von Burn St. Annapolis, MD 21403	Cods topy for campus	7/26/17-11/8/13	\$705.54							

Total this page \$ \$\frac{115.59}{2}\$



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Name of fund or co	mmittee	F) fun Congres	2
Report period - tran		•	5
	Schedule 5 - In-	-kind Contributions	
1	2	3	4
Date	Name and address of contributor	Description of In-kind Contribution	Fair Market Value (during this report period)
_		,	
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Total this page